National Institute on Drug Abuse

FOR EMBARGOED RELEASE
Monday, May 10, 2021
11:00 am ET

Contact: NIDA Press Office
301-443-6245
media@nida.nih.gov

Long-lasting medications may improve treatment satisfaction in people with opioid use disorder

NIH leaders emphasize the importance of patient voices in addiction medication development

WHAT: A commentary from leaders at the National Institute on Drug Abuse, part of the NIH, discusses a new study showing that an extended-release injection of buprenorphine, a medication used to treat opioid use disorder, was preferred by patients compared to immediate-release buprenorphine, which must be taken orally every day. Extended-release formulations of medications used to treat opioid use disorder may be a valuable tool to address the current opioid addiction crisis and reduce its associated mortality. The study and the accompanying commentary were published May 10, 2021 in *JAMA Network Open.*

It is well established that medications used to treat opioid use disorder are highly effective in preventing relapse into drug taking, facilitating recovery, and preventing overdoses. However, retention rates for these drugs are quite low, and 40% to 50% of patients treated with methadone or buprenorphine relapse within six months of starting treatment. Though extended-release formulations of these drugs are at least as efficacious as the daily, immediate release formulations, little is known about what patients want, and how they respond to different approaches to this treatment.

In the new study, which was not funded by the NIH, investigators in Australia conducted a randomized trial to compare patient-reported outcomes for daily sublingual buprenorphine treatment (tablets given under the tongue) to a weekly or monthly injection of extended-release buprenorphine for opioid use disorder. The researchers found that the extended-release injection of buprenorphine was well-tolerated, acceptable to patients, and produced generally more positive patient-reported outcomes (including overall patient satisfaction, effectiveness, and convenience) compared to daily oral buprenorphine. There were no significant differences in illicit opioid use or side effects between the two study groups.

In the accompanying commentary, NIDA leaders note that, too often, patient voices have been left behind in medication development. They argue that using patient preferences and patient-reported outcomes as measures of interest, rather than drug abstinence, fills an important research gap and may prove to be useful in medication trials moving forward. The NIDA authors also note that extended-release formulations may offer particular benefits in settings where patients have difficulty accessing consistent care – such as justice settings, populations experiencing homelessness, and in rural communities – as well as in reducing fentanyl-related overdoses in the current opioid epidemic. However, they stress that patient-reported outcomes for these treatment options should be studied in other systems of care to determine whether these findings are consistent.

ARTICLES:

WM Compton and ND Volkow. Extended-Release Buprenorphine and Its Evaluation With Patient-Reported Outcomes. *JAMA Network Open.* DOI: 10.1001/jamanetworkopen.2021.9708

N Lintzeris et al. Patient Reported Outcomes of Treatment of Opioid Dependence with Weekly and Monthly Subcutaneous Depot vs Daily Sublingual Buprenorphine: A Randomized Clinical Trial. *JAMA Network Open.* DOI: 10.1001/jamanetworkopen.2021.9041

WHO:
Nora D. Volkow, M.D., Director of the National Institute on Drug Abuse is available for interviews.

###

About the National Institute on Drug Abuse (NIDA): NIDA is a component of the National Institutes of Health, U.S. Department of Health and Human Services. NIDA supports most of the world's research on the health aspects of drug use and addiction. The Institute carries out a large variety of programs to inform policy, improve practice, and advance addiction science. For more information about NIDA and its programs, visit www.drugabuse.gov.

About the National Institutes of Health (NIH): NIH, the nation's medical research agency, includes 27 Institutes and Centers and is a component of the U.S. Department of Health and Human Services. NIH is the primary federal agency conducting and supporting basic, clinical, and translational medical research, and is investigating the causes, treatments, and cures for both common and rare diseases. For more information about NIH and its programs, visit www.nih.gov.

NIH…Turning Discovery Into Health®